

**FIG. 1**

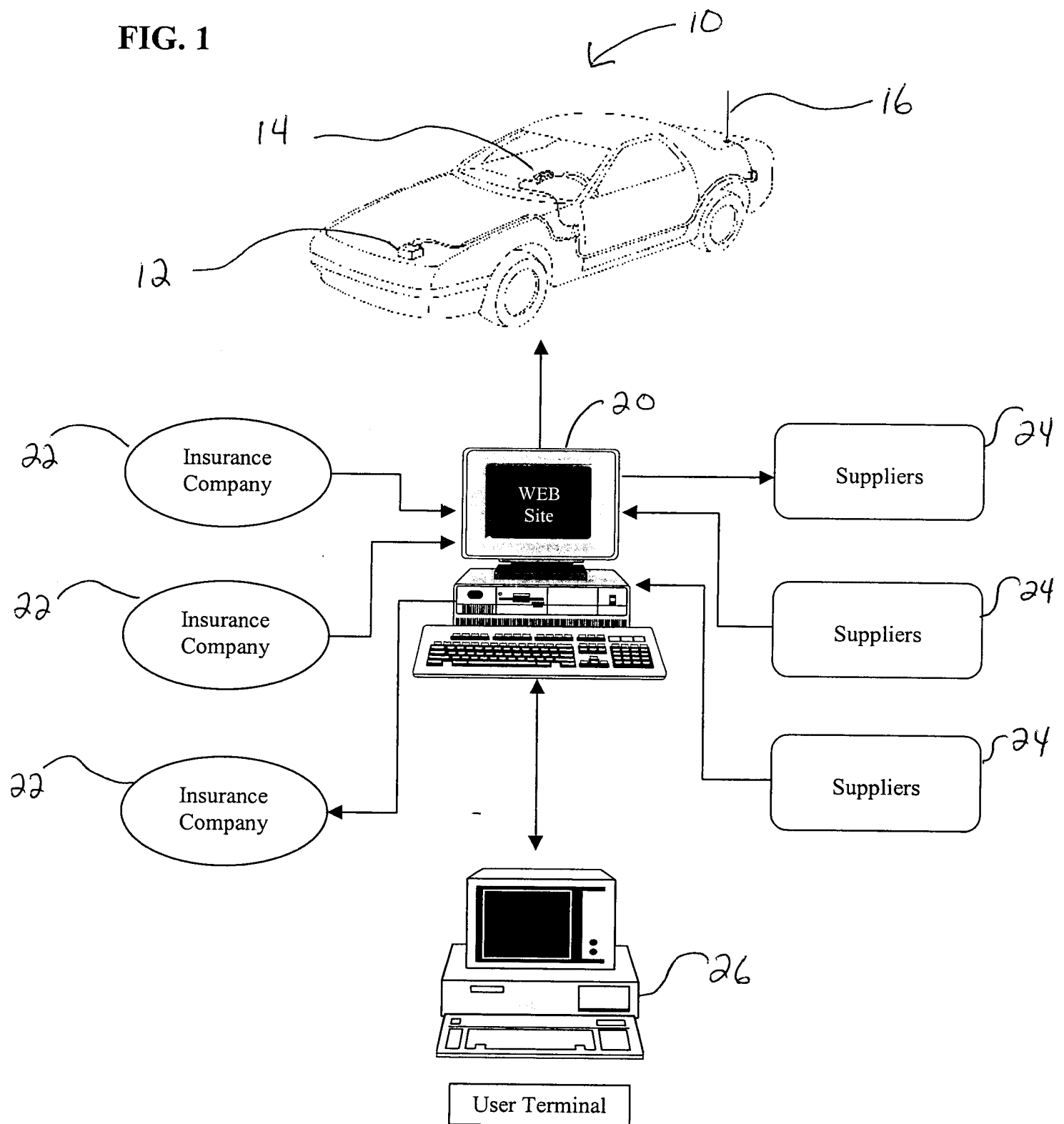


FIG. 2

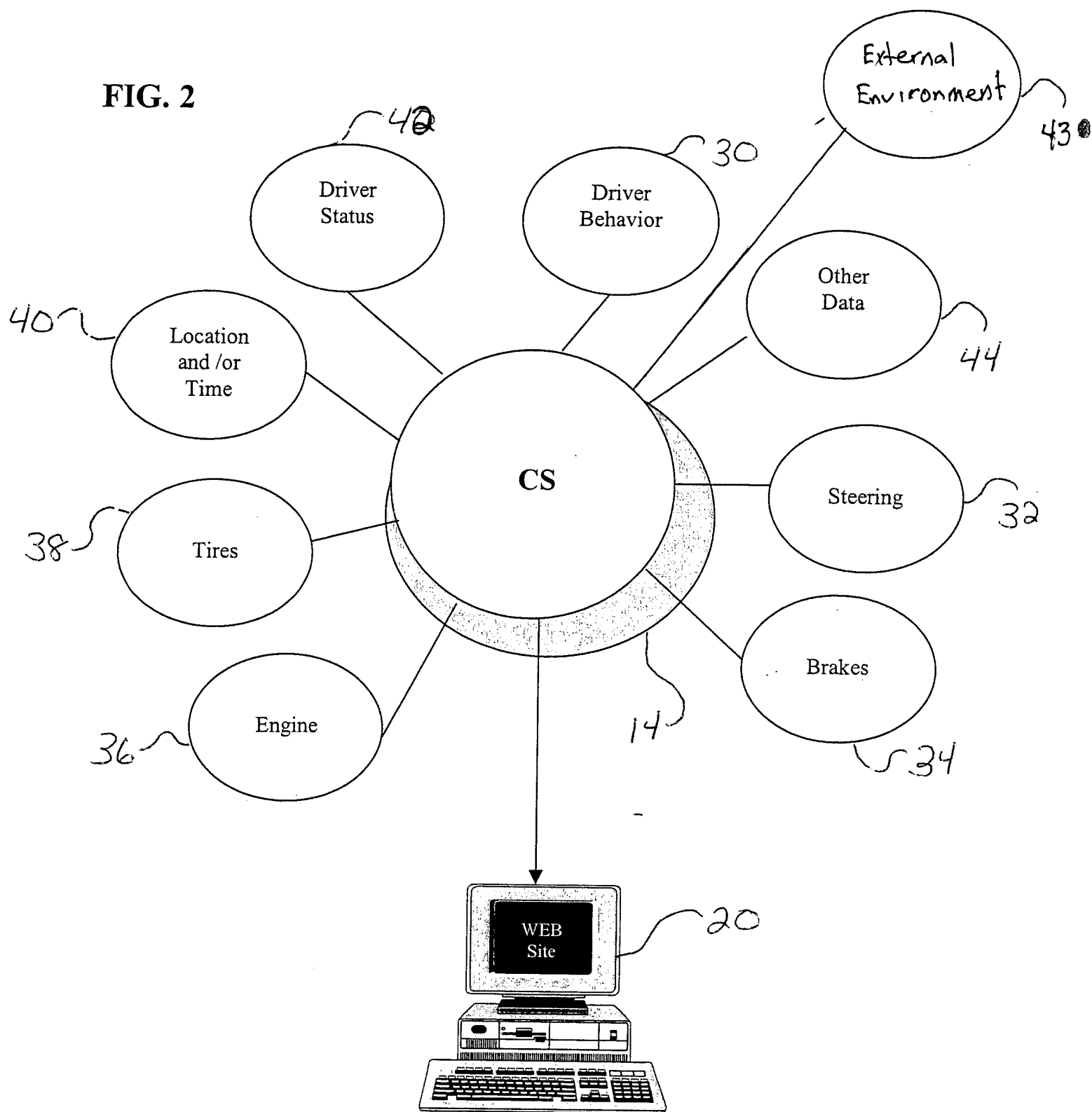


FIG. 3

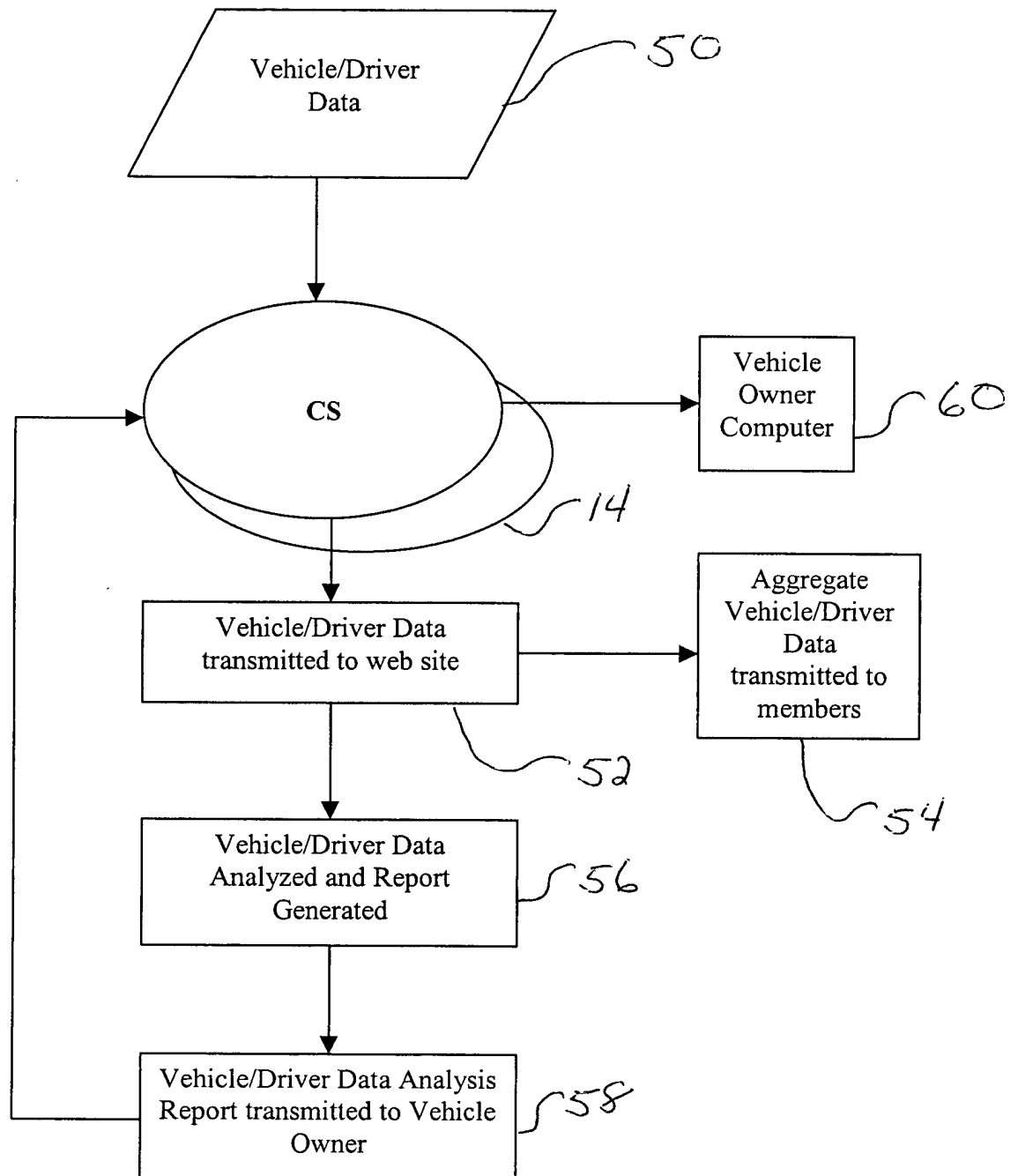
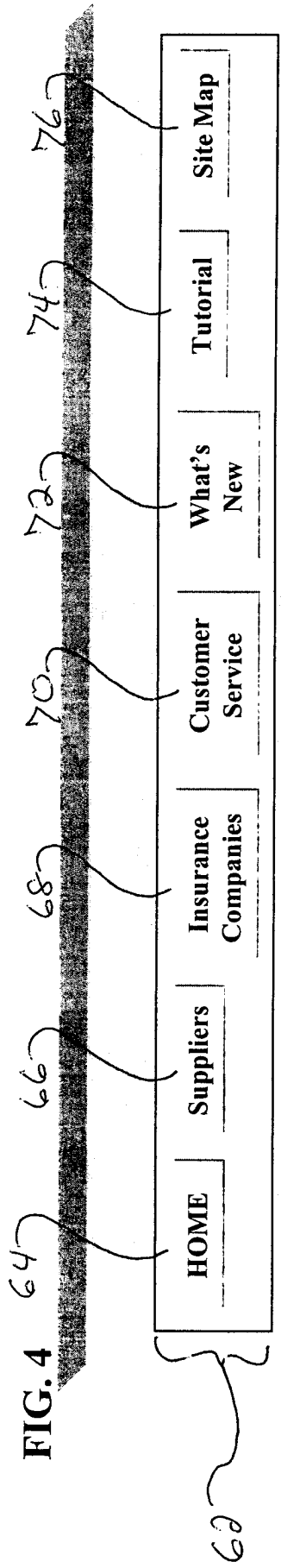


FIG. 4



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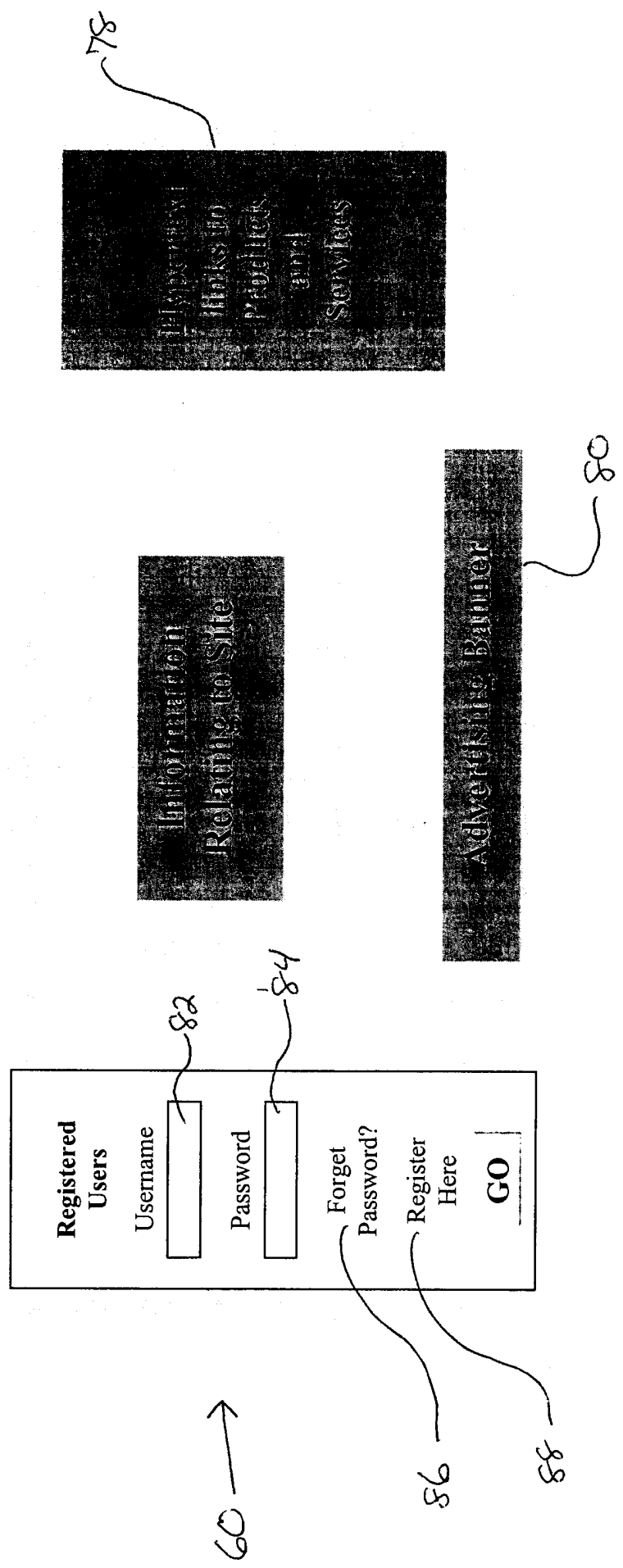


Fig. 5

902 →

# Site Registration

| Basic Information |                | Types of Insurance Coverage                                                                                   |                          | Vehicle Information             |     |
|-------------------|----------------|---------------------------------------------------------------------------------------------------------------|--------------------------|---------------------------------|-----|
| 91                | NAME:          | YES                                                                                                           | NO                       | Type/Model:                     | 96  |
| 92                | ADDRESS        | Liability <input type="checkbox"/>                                                                            | <input type="checkbox"/> | Year:                           | 97  |
| 93                | Age:           | Uninsured Motorist <input type="checkbox"/>                                                                   | <input type="checkbox"/> | Safety Equip.:                  | 98  |
| 94                | Sex:           | Comprehensive <input type="checkbox"/>                                                                        | <input type="checkbox"/> |                                 |     |
| 95                | Other Drivers: | Collision <input type="checkbox"/>                                                                            | <input type="checkbox"/> |                                 |     |
|                   |                | 100K 700K 500K<br>Liability Limits <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> |                          | Driver Information              |     |
|                   |                | 500/500 500/1000<br>Deductibles <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>    |                          | Any Insurance Claims filed: 106 | 99  |
|                   |                | 100K 700K 500K<br>Violations/Citations: 105                                                                   |                          |                                 | 100 |
|                   |                | Driver's License #                                                                                            |                          |                                 | 107 |

FIG. 6

